

BOARD OF ACCOUNTANCY

2000 EVERGREEN STREET, SUITE 250 SACRAMENTO, CA 95815-3832 TELEPHONE: (916) 263-3680 FACSIMILE: (916) 263-3675 WEB ADDRESS: http://www.dca.ca.gov/cba





OUT-OF-STATE FORM

(CALIFORNIA CANDIDATES TAKING THE CPA EXAM IN ANOTHER STATE)

This form must be completed if you are qualified to take the California CPA Examination in another state. Refer to the Information For CPA Candidate brochure for the qualifications to sit out-of-state. If you qualify, you must submit the appropriate documentation, fees, and photo with your application.

Mark the ap	propriate items b	elow:				
	Enclosed is a letter from the Dean of the Registrar of the University stating that I am a full-time student, for the current semester of Transcripts, registration forms are not valid documents.					
	Enclosed is a letter from my employer stating that I am permanently assigned in California and have been temporarily transferred to another state, for temporary employment beginning on through					
	Enclosed is a copy of my military duty orders.					
	Enclosed is \$ proctoring fee for (proctoring state). (Verify with the proctoring state for the appropriate payee's name) This fee is in addition to the California Out-of-State processing fee.					
	Enclosed is a "2 X "2 photo to be sent by California to the proctoring state.					
First Name	e, Middle Initial					
Last Name)					
Address						
City, State,	, Zip Code					
Country						
Daytime/Message Phone						
Fax Number	er					
E-mail Add	dress					
Social Sec	urity Number					
Location Re (Please note	equested:e that some state	es have de	signated sites	6)	((City & State)
Subject:	LPR □ A	ND 🗆	ARE 🗌	FARE 🗌	ALL SUB	JECTS 🗆
Signature:				Date		